

## Tab VIII Section 6 – Company Background and References

*REQUIREMENT: RFP Section 11.2.2.8, pg. 92*

*Vendors must place their written response(s) in bold/italics immediately following the applicable RFP question, statement and/or section. This section must also include the requested information in Section 6.2, Subcontractor Information, if applicable. (Per response #279 in Amendment No. 1 dated April 13, 2012, Vendors can place the State requirements in bold/italics and present the response in normal font. It is the intention that the Vendor's response be distinct from the RFP language)*

*Xerox brings proven tools and a unique mix of relevant experience to implement a low-risk, low-cost of ownership SAAS solution to support the Silver State Health Insurance Exchange's (the Exchange's) information technology and business functions to meet its goals of extending coverage to tens of millions of Americans.*

Xerox recognizes the need to provide effective healthcare services focused on Nevada consumers. We combine advanced tools, excellent management, enrollment, and customer service to help in the development and execution of the Exchange's project. The Xerox team has successfully handled government healthcare accounts and commercial exchanges using our advanced solutions and highly reliable infrastructure.

We have approximately 4,742 employees exclusively dedicated to helping clients execute, operate, and improve healthcare programs. As one of the first and most accomplished companies in the industry, we have enjoyed a historic partnership with the Center for Medicare and Medicaid Services (CMS). We continue to work closely with federal and state government entities to improve Medicaid services nationwide. Additionally, our employees also provide a wide range of government support services, including data collection and verification services, case management, customer contact centers, information management services, payment methodology development, claims and policy analysis, and enrollment services.

Our client base includes state healthcare programs in 36 states and we serve 12 Medicaid programs, including the District of Columbia, providing Medicaid Management Information Systems (MMIS), fiscal agent (FA) services, or both, with five MMIS implementations in progress. For several of these programs, we also provide pharmacy benefits management (PBM), primary care case management (PCCM), and enrollment broker (EB) services as part of the MMIS/FA contract. Our other qualifications include:

- 29 years of integrated eligibility system experience
- 22 programs in 13 states for eligibility and enrollment services
- More than 20 million clients covered through our Medicaid and CHIP contracts annually
- 14 years administering CHIP programs nationwide
- More than 885,000 applications and renewals processed annually

Xerox drives change through our affiliation with several United States healthcare committees as follows:

- More than 40 years of experience in supporting government healthcare programs
- Healthcare operations in 36 states and the District of Columbia
- Solution components support more than 15 million consumers
- Provides year-round support to five commercial exchanges



# Xerox State Healthcare, LLC Certificate of Insurance



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
04/26/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Aon Risk Services Northeast, Inc. New York NY Office 199 Water Street New York NY 10038-3551 USA	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C. No. Ext):</b> (866) 283-7122	<b>FAX (A/C. No.):</b> (847) 953-5390
<b>INSURED</b> Xerox Corporation 45 Glover Ave. - 7th Floor Norwalk CT 06850 USA	<b>E-MAIL ADDRESS:</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>NAIC #</b>	
	<b>INSURER A:</b> Chartis Specialty Insurance Company	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
<b>INSURER E:</b>		
<b>INSURER F:</b>		

Holder Identifier :

**COVERAGES****CERTIFICATE NUMBER:** 570046021316**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	<b>GENERAL LIABILITY</b>						EACH OCCURRENCE	
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person)	
							PERSONAL & ADV INJURY	
							GENERAL AGGREGATE	
							PRODUCTS - COMP/OP AGG	
	GEN'L AGGREGATE LIMIT APPLIES PER:							
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	
	<b>UMBRELLA LIAB</b>	<input type="checkbox"/> OCCUR					EACH OCCURRENCE	
	<b>EXCESS LIAB</b>	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION							
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						<input type="checkbox"/> WC <input type="checkbox"/> STATU-TORY LIMITS <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				E.L. EACH ACCIDENT	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-EA EMPLOYEE	
							E.L. DISEASE-POLICY LIMIT	
A	E&O-ProfLiabPri			018785324 Prof Liab - Primary SIR applies per policy terms & conditions	05/26/2011	05/26/2012	Aggregate	\$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RE: RE: RFP purposes only. Evidence of Insurance. Total Professional Liability Limit = \$20,000,000. See attachment for Excess Professional Liability policies.

**CERTIFICATE HOLDER****CANCELLATION**

Xerox State Healthcare, LLC 9040 Roswell Road, Suite 700 Atlanta GA 30350 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  <i>Aon Risk Services Northeast, Inc.</i>

Certificate No : 570046021316

**INSURED**

Xerox Corporation  
45 Glover Ave. - 7th Floor  
Norwalk CT 06850 USA

**Excess Professional Liability**

Policy #XEOG21652453007  
ACE American Insurance Company  
\$10,000,000 excess of \$10,000,000

## ACS STATE HEALTHCARE, LLC

### Business Entity Information

Status:	Active	File Date:	7/19/2002
Type:	Foreign Limited-Liability Company	Entity Number:	LLC8861-2002
Qualifying State:	DE	List of Officers Due:	7/31/2012
Managed By:	Managers	Expiration Date:	7/19/2502
NV Business ID:	NV20021090239	Business License Exp:	7/31/2012

### Additional Information

Central Index Key:	
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### Registered Agent Information

Name:	CSC SERVICES OF NEVADA, INC.	Address 1:	2215-B RENAISSANCE DR
Address 2:		City:	LAS VEGAS
State:	NV	Zip Code:	89119
Phone:		Fax:	
Mailing Address 1:		Mailing Address 2:	
Mailing City:		Mailing State:	NV
Mailing Zip Code:			
Agent Type:	Commercial Registered Agent - Corporation		
Jurisdiction:	NEVADA	Status:	Active

### Financial Information

No Par Share Count:	0	Capital Amount:	\$ 0
No stock records found for this company			

### Officers

☐ Include Inactive Officers

Manager - J MICHAEL PEPPER			
Address 1:	2828 N HASKELL AVENUE	Address 2:	
City:	DALLAS	State:	TX
Zip Code:	75204	Country:	USA
Status:	Active	Email:	

### Actions\Amendments

Action Type:	Application for Foreign Registration		
Document Number:	LLC8861-2002-001	# of Pages:	1
File Date:	7/19/2002	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	LLC8861-2002-004	# of Pages:	1
File Date:	6/30/2003	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		

Document Number:	LLC8861-2002-002	# of Pages:	1
File Date:	6/24/2004	Effective Date:	
<b>List of Officers for 2004 to 2005</b>			
Action Type:	Registered Agent Change		
Document Number:	LLC8861-2002-003	# of Pages:	1
File Date:	7/20/2004	Effective Date:	
<b>CORPORATION TRUST COMPANY OF NEVADA STE 500</b>			
<b>6100 NEIL ROAD RENO NV 89511 SMM</b>			
Action Type:	Annual List		
Document Number:	20050275518-85	# of Pages:	1
File Date:	7/15/2005	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20060368162-74	# of Pages:	1
File Date:	6/8/2006	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20070354490-74	# of Pages:	1
File Date:	5/23/2007	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20080325546-55	# of Pages:	1
File Date:	5/12/2008	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20090464369-63	# of Pages:	1
File Date:	6/5/2009	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20100495272-82	# of Pages:	1
File Date:	7/6/2010	Effective Date:	
(No notes for this action)			
Action Type:	Annual List		
Document Number:	20110540511-70	# of Pages:	1
File Date:	7/22/2011	Effective Date:	
(No notes for this action)			

## VIII.1 Vendor Registration Information

Two years ago Xerox acquired Affiliated Computer Services, Inc. (ACS), combining Xerox's strengths in document technology with ACS' expertise in managing and automating work processes.

Since that time, Affiliated Computer Services, Inc. has marketed itself as ACS, A Xerox Company. Considering the significant progress we have made in uniting ACS with Xerox, we are now retiring the ACS brand in many areas of our services business and bringing together our services and technology portfolio under the Xerox brand.

**Effective April 1, 2012, ACS State Healthcare, LLC changed its name to Xerox State Healthcare, LLC.**

Per RFP Section 6.1.2, Xerox State Healthcare, LLC will be registered as a foreign corporation before contract execution as the name change from ACS to Xerox has been requested from the State of Nevada, Secretary of State's Office. A copy of our current registration has been included for the State's reference.

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- **ASC X12N Standards Setting Organization (x12.org).** This organization is designated by the Secretary of HHS as a Designated Standards Maintenance Organization (DSMO) under the Health Insurance Portability and Accountability Act (HIPAA) – Administrative Simplification provision. We regularly attend the X12 meetings and participate in the work groups for the HIPAA mandated transactions as well as transactions that are recommended for use but not under the current mandates. We have a corporate Membership. Our Director of National Standards Consulting group, Erik Newlin is an active voting member of this organization.
- **National Uniform Claim Committee (NUCC.org).** This organization is designated by the Secretary of HHS as a DSMO under the Health Insurance Portability and Accountability Act – Administrative Simplification provision. Our corporate representative, Erik Newlin, attends these meetings to keep abreast of CMS-1500 and provider taxonomy code related issues and changes.
- **National Uniform Billing Committee (NUBC.org).** This organization is designated by the Secretary of HHS as a DSMO under the HIPAA – Administrative Simplification provision. Erik Newlin attends these meetings to keep abreast of UB-04 related issues and changes.
- **Workgroup for Electronic Data Interchange (WEDI.org).** WEDI serves in an advisory role to the Secretary and the industry on HIPAA mandates. We regularly attend the WEDI meetings and actively participate in the work groups. We have a corporate membership.
- **ICD Code Maintenance Committee (CMS.gov).** We attend these meetings to keep abreast of ICD-10 developments (as well as changes to ICD-9).
- **American Health Information Management Association (AHIMA.org).** Erik Newlin is a member of AHIMA and attends many of their seminars and training sessions.
- **National Medicaid EDI Healthcare (NMEH).** We have served in a number of capacities on this workgroup including the founding Chair of the NMEH, Chair of the National Provider Identifier sub workgroup.

Our responses to RFP Sections 6.1, 6.2, and 6.3, respectively, are provided under the following headings:

- Vendor Information
- Subcontractor Information
- Business References

## VIII.1 Vendor Information

*REQUIREMENT: RFP Section 6.1, pg. 70*  
**6.1 VENDOR INFORMATION**

*The Silver State Health Insurance Exchange and its customers will benefit from a partner such as Xerox, that offers comprehensive experience and proven success in developing and implementing insurance exchange portals.*

Xerox is qualified to manage public and private insurance exchanges to help state agencies, public

- Firsthand experience operating end-to-end, self-sustaining exchanges
- Strong partnership with established subcontractor partners —CHOICE Administrators and KPMG
- More than 21 years of experience in customer contact center services, handling 30 million calls annually at over 27 centers nationwide
- Low cost of ownership and reduced setup costs through our SaaS solution model

authorities, and non-profit governance models to implement effective and efficient healthcare solutions. As a longtime provider of healthcare-related services to state government customers nationwide, Xerox has extensive experience with project management of large-scale implementations, which is one of our roles in this project, including the knowledge and expertise to manage insurance exchange portal customization and implementation.

6.1.1 Vendors must provide a company profile in the table format below.

Table VIII-1. Xerox State Healthcare, LLC Company Profile	
Question	Response
Company name:	Xerox State Healthcare, LLC
Ownership:	Wholly owned subsidiary of Xerox Business Services, LLC, which is a wholly owned subsidiary of Xerox Corporation
State of Incorporation:	Delaware
Date of Incorporation:	March 25, 1999
No. of years in the business	42 years
List of top officers	<ul style="list-style-type: none"> <li>Chairman and Chief Executive Officer, Xerox Corporation – Ursula Burns</li> <li>President and Chief Executive Officer, Xerox Business Services, LLC – Lynn Blodgett</li> <li>President, Xerox State Healthcare, LLC – Will Saunders</li> <li>Vice President for HIX – Bryan Christiansen</li> </ul>
Location of company headquarters:	9040 Roswell Road Suite 700 Atlanta, GA 30350 Main Telephone Number: 678-352-7200 1-800-344-5979
Location(s) of company offices:	<b>Solution</b> 8260 Willow Oaks Corporate Drive Fairfax, VA 22031  <b>Telephony and Hosting</b> 4920 Campbells Run Road Pittsburgh, PA 15205-1321  <b>Customer Service Center</b> 385-B Highland Colony Parkway Ridgeland, MS 39157  <b>Payment Intake, Mailroom, and Printing – CHOICE Administrators®</b> 721 South Parker Suite 200 Orange, CA 92868
Location(s) of the office that will provide the services described in this RFP:	The State will be providing 5 seats in its center, supported by Xerox Team members in Pittsburgh, PA, Ridgeland, MS and Orange, CA as noted above.

Table VIII-1. Xerox State Healthcare, LLC Company Profile	
Question	Response
Number of employees locally with the expertise to support the requirements identified in this RFP:	180
Number of employees nationally with the expertise to support the requirements in this RFP:	4,742
Location(s) from which employees will be assigned for this project:	The State will be providing 5 seats in its center, supported by Xerox Team members in Pittsburgh, PA, Ridgeland, MS and Orange, CA as noted above.

*6.1.2 Please be advised, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state must register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.*

We are still registered as ACS State Healthcare, LLC in the State of Nevada at the time of this RFP submission. Please see the end of the section for a copy of our Foreign Corporation Registration form and verbiage to the Exchange that the name change will be completed before a contract is executed for this project.

*6.1.3 The selected vendor, prior to doing business in the State of Nevada, must be appropriately licensed by the State of Nevada, Secretary of State's Office pursuant to NRS76. Information regarding the Nevada Business License can be located at <http://sos.state.nv.us>.*

Table X-C, State of Nevada License, indicates our Nevada Business License pursuant to NRS76.

Table VIII-2. State of Nevada License	
Question	Response
Nevada Business License Number:	Nevada Business ID Number: NV20021090239 Entity Number: LLC8861-2002to
Legal Entity Name:	Xerox State Healthcare, LLC

*Is "Legal Entity Name" the same name as vendor is doing business as?*

Yes	<b>X</b>	No	
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*If "No", provide explanation.*

*6.1.4 Vendors are cautioned that some services may contain licensing requirement(s). Vendors shall be proactive in verification of these requirements prior to proposal submittal. Proposals that do not contain the requisite licensure may be deemed non-responsive.*

Xerox will provide licensing rights, to which it will be bound, in accordance with 13.3.11.1, for the SaaS solution proposed. Xerox assumes that 13.3.11.1 provides the State with a sufficient license to operate and maintain its Exchange. In addition, Xerox will provide any hardware and software maintenance as required under this RFP and subsequent contract.

*6.1.5 Has the vendor ever been engaged under contract by any State of Nevada agency?*

Yes		No	<b>X</b>
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If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.

Question	Response
Name of State agency:	
State agency contact name:	
Dates when services were performed:	
Type of duties performed:	
Total dollar value of the contract:	

6.1.6 Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?

Yes		No	X
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If "Yes", please explain when the employee is planning to render services, while on annual leave, compensatory time, or on their own time?

If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person will be performing or producing the services which you will be contracted to provide under this contract, you must disclose the identity of each such person in your response to this RFP, and specify the services that each person will be expected to perform.

6.1.7 Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP must also be disclosed.

Does any of the above apply to your company?

Yes	X	No	
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If "Yes", please provide the following information. Table can be duplicated for each issue being identified.

## Litigation

Xerox State Healthcare, LLC has not been alleged or held liable in the State of Nevada. However, Xerox State Healthcare, LLC is subject to various legal proceedings, inquiries, claims and disputes which arise in the ordinary course of business and would not be unusual for a company of our size and scope of operations. Set forth below is a disclosure of material litigation involving the Vendor over the past six (6) years for litigation relating to government contracts where Xerox has been alleged or held liable, as well as a description. It's important to note that in the cases listed below, the identified States were co-defendants. In these cases Xerox was acting on behalf of the States as a fiscal agent. The liability ultimately resided with the State and not Xerox. As the Fiscal Agent, Xerox will pay claims as instructed by the State. However, none of the cases listed below adversely affect Xerox's ability to perform on this contract. The list does not include: (i) administrative matters that do not involve contested, "trial-type" proceedings; (ii) routine collection matters; (iii) employment disputes; (iv) bid protests; or (v) matters arising outside of the United States.

Further information with regard to material legal proceedings involving Xerox may be found in the periodic disclosures to the Securities and Exchange Commission, under Forms 10-K and 10-Q filed by our ultimate parent company, Xerox Corporation. These documents may also be accessed by visiting the Xerox Corporation website ([www.xerox.com](http://www.xerox.com)) and following the link to "Investors".

<i>Question</i>	<i>Response</i>	
<b>Date of alleged contract failure or breach:</b>	August 23, 2006	
<b>Parties involved:</b>	Cheryl Freeman-Jackson, DDS v. ACS & the Georgia Dept. of Community Health	
<b>Description of the contract failure, contract breach, litigation, or investigation, including the products or services involved:</b>	The plaintiff, a dentist, alleged denial of payment for services under a Georgia dental program.	
<b>Amount in controversy:</b>		
<b>Resolution or current status of the dispute:</b>	ACS State Healthcare, LLC was dismissed from the suit in November 2006.	
<b>If the matter has resulted in a court case:</b>	<b>Court</b>	<b>Case Number</b>
	Fulton Co., GA Superior Court	
<b>Status of the litigation:</b>	Closed	

<i>Question</i>	<i>Response</i>	
<b>Date of alleged contract failure or breach:</b>	January 2009	
<b>Parties involved:</b>	Mondragon v. ACS & Texas Medicaid and Healthcare Partners	
<b>Description of the contract failure, contract breach, litigation, or investigation, including the products or services involved:</b>	The plaintiff alleged denial of benefits by ACS State Healthcare, LLC.	
<b>Amount in controversy:</b>		
<b>Resolution or current status of the dispute:</b>	This suit is concluded.	
<b>If the matter has resulted in a court case:</b>	<b>Court</b>	<b>Case Number</b>
	Dallas Co., TX District Court	
<b>Status of the litigation:</b>	Closed	

<i>Question</i>	<i>Response</i>	
<b>Date of alleged contract failure or breach:</b>	January 2009	
<b>Parties involved:</b>	Velasquez v. ACS & Texas Medicaid and Healthcare Partners	
<b>Description of the contract failure, contract breach, litigation, or investigation, including the products or services involved:</b>	The plaintiff alleged denial of benefits by ACS State Healthcare LLC.	
<b>Amount in controversy:</b>		
<b>Resolution or current status of the dispute:</b>	This suit is concluded.	
<b>If the matter has resulted in a court case:</b>	<b>Court</b>	<b>Case Number</b>
	Dallas Co., TX District Court	
<b>Status of the litigation:</b>	Closed	

6.1.8 Vendors must review the insurance requirements specified in Attachment E, Insurance Schedule for RFP 2023. Does your organization currently have or will your organization be able to provide the insurance requirements as specified in Attachment E.

Yes	<b>X</b>	No	
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Please see the end of the section for a copy of our Certificate of Insurance.

*Any exceptions to the insurance requirements must be identified on Attachment B, Technical Proposal Certification of Compliance with Terms and Conditions of RFP. In order for any exceptions to the insurance requirements to be considered they must be documented in detail in Attachment B. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission.*

*Upon contract award, the successful vendor must provide the Certificate of Insurance identifying the coverage as specified in Attachment E, Insurance Schedule for RFP 2023.*

**6.1.9** *Company background/history and why vendor is qualified to provide the services described in this RFP. Limit response to no more than five (5) pages.*

## Company Background and History

We possess comprehensive knowledge of healthcare business needs and this guides the development of our solutions suitable for the needs of the Exchange's customers and brokers. Our more than 40 years of experience stands as a demonstration of our commitment to this industry and serves as evidence of our success in providing effective fiscal agent services, strong technical solutions, and excellent operations on behalf of our clients.

Xerox has deep understanding of government healthcare policies, programs, and operations – providing more than 30 years of eligibility and enrollment experience. Additionally, we have five ongoing eligibility determination projects.

We are one of a few long-term Medicaid contractors with a proven history of providing fiscal agent services and innovative and comprehensive alternatives to meet current and future needs. We provide a complete array of diversified Medicaid services including:

- Medicaid Management Information Systems (MMIS)
- Fiscal agent services
- Pharmacy benefits management
- Decision support/data warehouse
- Health information exchange/electronic health records (HIE/EHR)
- Clinical consulting and management tools
- Fraud and abuse detection; enrollment broker
- Call center services
- Health care analytics
- Care and disease management

Our history dates back to 1970 as Consultec, Inc., a Georgia corporation and one of the oldest firms in the Medicaid market. In 1971, we established the federal government standard for MMIS when we developed the general systems design of a prototype MMIS for the United States Department of Health, Education, and Welfare. We were also the first enrollment broker in the nation for Medicaid in 1984, pioneered efforts in managed care program design and development dating back to the 1970s, and became the first Medicaid fiscal agent to process pharmacy claims at the point of service in August 1992. Table VIII-3, Xerox at a Glance, provides a glimpse of Xerox's capabilities.

**Table VIII-3. Xerox at a Glance**

- 14 IT Data Centers
- 14 Major Finance and Accounting Centers
- 14 Major Human Resource Centers
- 18 Major Customer Care Centers

**Table VIII-3. Xerox at a Glance**

- 750 locations in 160 countries
- Approximately 140,000 employees worldwide; over 4,742 employees dedicated to public sector healthcare
- First in the nation to receive ISO 20000 certification for IT service quality
- First in the world to achieve ISO 20000 certification across multiple data centers in domestic and international locations (14 to date)
- Led by 25 Global BPO Centers of Excellence

The “client first” environment of Xerox reinforces our responsive, flexible, and reliable solutions that our healthcare customers require to address unique and complex challenges. We possess a strong reputation for innovation, whether perfecting new technologies or transforming government operations.

### ***Qualifications for Implementing and Operating an Exchange***

Our staff and solutions support numerous healthcare service delivery models that facilitate access to needed care, including fee-for-service; fully and partially capitated payment models; managed care, including primary care case management and medical homes; and long-term care. We support the full healthcare continuum, offering solutions and technology that promote total population health management and e-health.

We recognize the extensive implications of these program changes from both an operational and administrative perspective. Xerox recognizes the importance of planning for and establishing the appropriate infrastructure for the successful implementation of healthcare reform. As a qualified provider of reliable, flexible, and responsive solutions of highest professional standards, Xerox is well-positioned to work with the Exchange to implement and operate a scalable public exchange solution. As shown in Table X-F, Qualifications for Implementing and Operating an Exchange, Xerox brings the broad range of experience and expertise in both public and private sectors necessary for an ACA-compliant exchange.

**Table VIII-4. Qualifications for Implementing and Operating an Exchange**

Range of Services	Since 1971, we have provided a broad range of technology and services across Medicaid, including the design, development, implementation, and administration of:	
	<ul style="list-style-type: none"> <li>• Fiscal agent operations</li> <li>• CHIP</li> <li>• PCCM</li> <li>• Care management programs</li> <li>• Long term care (LTC) programs</li> <li>• Eligibility pre-determination and processing</li> </ul>	<ul style="list-style-type: none"> <li>• PBM</li> <li>• Health benefits administration</li> <li>• Informed Health</li> <li>• Managed care enrollment, including the design and implementation of effective managed care enrollment strategies for programs of varying sizes and complexity</li> </ul>

**Table VIII-4. Qualifications for Implementing and Operating an Exchange**

Accomplishments	<p>We possess an extensive history in the government healthcare arena and the expertise necessary to understand and establish the implications of health reform in the future for Nevada. Our accomplishments include:</p> <ul style="list-style-type: none"> <li>• Pioneering enrollment assistance services in 1983, becoming the nation's first enrollment contractor for Medicare</li> <li>• Pioneering Medicaid enrollment assistance, implementing one of the first Medicaid Enrollment Broker programs in 1984</li> <li>• Implementing one of the first Medicaid eligibility verification systems; among the earliest vendors to implement a Medicaid eligibility verification system with direct access to the current client recipient eligibility file</li> <li>• Developing the fastest CHIP eligibility determination system with the greatest capacity of any system of its time</li> <li>• Developing the first truly Web-based, MITA 3.0 aligned, natively SOA-compliant MMIS, our Health Enterprise™ solution</li> <li>• Pioneering the implementation and operation of relational database management systems (RDBMS) for Medicaid programs</li> </ul>
Human Resources	<ul style="list-style-type: none"> <li>• With more than 160,000 employees worldwide, including 4,742 focused on public healthcare domestically, Xerox has the depth of knowledge to provide consulting, technical, policy, and legal resources needed for Nevada to proactively implement health reform.</li> <li>• Our team members include former Medicaid directors, pharmacists, nurses, clinicians, quality assurance experts, fraud investigators, health policy experts, health economists, actuaries, and system analysts.</li> <li>• Within Xerox, we have a group of specialized operations consultants (the Operations Consultants Group, or OCG) that the Nevada project team can call upon to assist with this scope of work. The OCG understands how to implement new programs, how to simplify business processes, and understands how to deliver change to an existing workforce that minimizes risk and disruption.</li> <li>• Our professionals are knowledgeable in program administration and possess experience in Medicaid, Medicare, CHIP, managed care, pharmacy benefits management, care management, and commercial health programs.</li> </ul>

### ***The Xerox Team – The HIX Solution Suite***

With passage of the Affordable Care Act (ACA), Xerox recognizes the reality that the design of any exchange is critical to the successful operation of the provisions to expand access to health coverage. It is also an opportunity to change traditional payment and delivery models of care to ensure all customers receive more effective and efficient care than before regardless if they are covered through the exchanges, other government programs, employers, or other private payers. Realizing that all states are different in size, demographics, and political dynamics, the ACA is written to allow states the flexibility needed to design and implement an exchange model that meets each state's specific needs.

The Xerox Team offers in-depth experience in the development, implementation, and operation of healthcare exchange systems that support both individual and group markets in shopping for and comparing health plan offerings nationwide and in Nevada. These decision support tools have proved valuable for our users in transaction completion and customer understanding, and have enhanced the customer experience for both groups and individuals.



## ***Xerox Experience with Service Centers/Call Centers***

Call center service is a core competency of Xerox. Our call center operations include 27 multilingual, multicultural government healthcare call centers, ranging in size from 10 to 240 telephone representatives that handle about 30 million calls annually. With more than 21 years of experience in call center services, we have achieved an outstanding standard of excellence. In 2005, we became the only company in the healthcare industry to receive the PaceSetter award by the Call Center Industry Advisory Council (CIAC). This highly coveted honor recognizes Xerox as a global leader in call center services. We are also renowned for call center operation customer satisfaction excellence under the rigorous J.D. Power and Associates Call Center Certification Programs. This prestigious program distinguishes the top-performing call center operations from among 75,000 call centers in North America and approximately 125,000 centers worldwide. This distinction acknowledges our call center operations as process-oriented, professionally managed, and focused on providing the highest levels of customer satisfaction.

## ***Opportunities to Reduce Exchange Operating Costs***

Our unique HIX Solution Suite combines proven operational expertise with modern technology. Our Solution is designed to be compliant with the ACA and all subsequent government rules and proposed regulations, providing flexibility through system configuration tools and open Application Programming Interfaces (APIs) to quickly accommodate regulatory and market trends. Our SaaS solution provides the most cost-effective means to administer an exchange for both short-term implementation and long-term maintenance costs, allowing for a lower total cost of ownership than traditional, on-premise, IT models.

*6.1.10 Length of time vendor has been providing services described in this RFP to the public and/or private sector. Please provide a brief description.*

The Xerox Team, including subcontractors *CHOICE* Administrators and KPMG International (KPMG), have been serving commercial exchanges since 1993.

The components of our HIX Solution Suite that support the Small Group Health Options Program (SHOP) experience are some of the most robust in the marketplace today. More than 37 of the largest carriers in the country provide benefit administration services to individuals, families, and small group customers under a private label of our solution. Our solution is scalable enough to support the potential population of small businesses accessing the Silver State Health Insurance Exchange. Of small businesses with two or more employees in the United States today, one in every ten groups are using the components that comprise our solution today.

*6.1.11 Financial information and documentation to be included in Part III, Confidential Financial of vendor's response in accordance with Section 12.5, Part III – Confidential Financial.*

*6.1.11.1 Dun and Bradstreet Number*

*6.1.11.2 Federal Tax Identification Number*

*6.1.11.3 The last two (2) years and current year interim:*

*A. Profit and Loss Statement*

*B. Balance Statement*

Xerox has a history of financial stability and success. The Exchange can be assured that we have the financial resources and stability necessary to fulfill the requirements of this contract. As evidence of our financial wherewithal and stability, we are providing the requested financial documents in Tab II Financial Information and Documentation included in the Part III, Confidential Financial proposal.

## VIII.2 Subcontractor Information

**REQUIREMENT: RFP Section 6.2, pg. 73**

**6.2.1 Does this proposal include the use of subcontractors? Check the appropriate response in the table below.**

Yes	X	No	
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**If “Yes”, vendor must:**

**6.2.1.1 Identify specific subcontractors and the specific requirements of this RFP for which each proposed subcontractor will perform services.**

The Xerox Team combines the expertise, experiences, and solution offerings of two subcontractors, *CHOICE* Administrators® and KPMG International, to develop and operate an exchange that will provide access, affordability, and choice to the consumers in Nevada.

Each of our partners has specific roles in meeting specific requirements:

For *CHOICE* Administrators they are: (1) application and enrollment; (2) plan management; (3) financial management; (4) communications; and (5) hosting and support.

KPMG will provide an implementation manager to oversee the implementation of products and services outlined in the RFP. It will also be the responsibility of KPMG to provide the staff members who will perform the following scope of work under the direction of the Xerox Project Management Office (PMO):

- Management and support of the CMS’ Investment Lifecycle, as defined in RFP Section 5.4.2.5.B, CMS’ Investment Lifecycle (ELC)
- Project quality management, as defined in RFP Section 5.4.2.5.G, Project Quality Management
- Quality assurance, as defined in RFP Section 6.8 Quality Assurance
- Requirements management, including facilitating requirement gathering and validation during the development and implementation

**6.2.1.2 If any tasks are to be completed by subcontractor(s), vendors must:**

**A. Describe the relevant contractual arrangements;**

Xerox has executed teaming agreements with *CHOICE* Administrators and KPMG, which define the relationship of the subcontractor to Xerox, the scope of work, and terms of the agreement. The teaming agreements serve as the basis for the subcontract between Xerox and our subcontractors once our contract with the Exchange is executed. Our relationships with *CHOICE* Administrators and KPMG are long-standing and include proposed joint implementations for other customers.

**B. Describe how the work of any subcontractor(s) will be supervised, channels of communication will be maintained and compliance with contract terms assured; and**

The Xerox teaming approach minimizes risk and provides successful contract execution by using a due diligence process to select partners that can bring value and innovation to the assigned tasks. We employ an integrated management approach with clearly stated roles and responsibilities, well defined lines of authority, and open channels of communication.

Successful support of the Exchange requires a wide variety of skill sets and niche expertise to meet the requirements. As the prime contractor, Xerox is fully responsible for all program management and overall contract performance, including partner performance. For that reason, Xerox carefully considers and limits the number of teaming partners selected to ensure risk is minimized.

*C. Describe your previous experience with subcontractor(s).*

A key differentiator of Xerox is our real-world experience in operating exchanges, administering Medicaid/CHIP eligibility programs, and working with carriers. By combining forces with the nation's leader in developing and administering health insurance exchanges in *CHOICE* Administrators and with the industry leader in knowledge and experience when it comes to health and human services (HHS) initiatives in KPMG, the Exchange can expect our solution to create a successful, financially sustainable exchange environment.

*6.2.1.3 Vendors must describe the methodology, processes and tools utilized for:*

*A. Selecting and qualifying appropriate subcontractors for the project;*

Xerox seeks strategic partners with the experience to add value to our core strengths and with experienced staff and proven features for our HIX offering. After reviewing several companies for their technical expertise, their place in the commercial market, and their existing infrastructure, we selected *CHOICE* Administrators and KPMG to complement our existing solutions and form our HIX Solution Suite for the Exchange. Our partners bring proven experience and the ability to support rapid implementation of diverse exchange models, adding value to our HIX offering and low-risk approach for implementing it in Nevada.

*B. Incorporating the subcontractor's development and testing processes into the vendor's methodologies;*

Xerox, *CHOICE* Administrators, and KPMG comprise a team that successfully integrates industry-leading products and services. Together, our team brings unsurpassed capabilities, experience, and commitment to the Exchange. As prime contractor, Xerox oversees project activities to ensure assigned resources, including partners, are cohesively and seamlessly integrated for overall project delivery. For this project, we have selected companies with proven ability to deliver quality services. Our valued partners *CHOICE* Administrators and KPMG were selected based on many critical factors relevant to the Exchange requirements.

*C. Ensuring subcontractor compliance with the overall performance objectives for the project; and*

We manage these partnerships by establishing and satisfying subcontractor agreements that align with procurement management principles. We maintain statements of work and partner agreement with our partners. These documents serve as the basis for managing partnership. Additionally, we maintain a formal process to verify that the delivered product meets contractual requirements.

*D. Ensuring that subcontractor deliverables meet the quality objectives of the project.*

As the prime contractor, Xerox retains responsibility for all performance requirements of the Exchange contract even when performance may be carried out through a partnership teaming agreement. Our processes ensure that all deliverables, including partner deliverables, pass many quality assurance thresholds before the Exchange receives the product. With oversight from the Xerox program manager, we manage project resources to produce high quality, measurable work products and deliverables that are in balance with resources, time, scope, and budget parameters. We employ the same deliverable review

process for all deliverables, whether produced by staff employed by Xerox, *CHOICE* Administrators, or KPMG.

6.2.1.4 Provide the same information for any proposed subcontractors as requested in Section 6.1, Vendor Information.

## ***CHOICE Administrators***

### ***Corporate Information***

*CHOICE* Administrators is the nation's leader in developing and administering health insurance exchanges, with experience supporting integrated and proven exchange models since 1996. Currently serving more than 10,000 employers and 150,000 members, *CHOICE* is the most experienced and successful operator of health insurance exchanges in the country. Their turnkey solutions provide states the quick, efficient, and cost-effective means to establish and operate an exchange that attracts consumers, employer interest, and enrollment.

Vendors must provide a company profile in the table format below.

### ***Company Profile***

Table VIII-5, *CHOICE* Administrators, Inc. Company Profile, details its company profile.

Table VIII-5. <i>CHOICE</i> Administrators, Inc. Company Profile	
Question	Response
Company name:	<i>CHOICE</i> Administrators, Inc.
Ownership:	Privately owned subsidiary of the Word and Brown Companies
State of Incorporation:	California
Date of Incorporation:	1996
No. of years in the business	16 years
List of top officers	Ron Goldstein, CLU – President & Chief Executive Officer Kevin Counihan – President Brenda J. Scott – Senior Vice President Clinton Gee, CPA – Chief Financial Officer
Location of company headquarters:	721 South Parker Street, Suite 300, Orange, CA 92868
Location(s) of company offices:	721 South Parker Street, Suite 300, Orange, CA 92868 10801 West Charleston Boulevard, Suite 520, Las Vegas, NV 89135
Location(s) of the office that will provide the services described in this RFP:	721 South Parker Street, Suite 300, Orange, CA 92868
Number of employees locally with the expertise to support the requirements identified in this RFP:	6

Table VIII-5. <i>CHOICE</i> Administrators, Inc. Company Profile	
Question	Response
Number of employees nationally with the expertise to support the requirements in this RFP:	720
Location(s) from which employees will be assigned for this project:	Orange, CA

*Please be advised, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state must register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.*

*CHOICE Administrators is still registered in the State of Nevada at the time of this RFP submission.*

*The selected vendor, prior to doing business in the State of Nevada, must be appropriately licensed by the State of Nevada, Secretary of State's Office pursuant to NRS76. Information regarding the Nevada Business License can be located at <http://sos.state.nv.us>.*

Table VIII-6 provides the Nevada Business License of *CHOICE* Administrators.

Table VIII-6. State of Nevada License	
Question	Response
Nevada Business License Number:	Nevada Department of Insurance License: 657395
Legal Entity Name:	CHOICE Administrators, Inc.

*Is "Legal Entity Name" the same name as vendor is doing business as?*

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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*Vendors are cautioned that some services may contain licensing requirement(s). Vendors shall be proactive in verification of these requirements prior to proposal submittal. Proposals that do not contain the requisite licensure may be deemed non-responsive.*

*Has the vendor ever been engaged under contract by any State of Nevada agency?*

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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*If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.*

Question	Response
Name of State agency:	
State agency contact name:	
Dates when services were performed:	
Type of duties performed:	
Total dollar value of the contract:	

*Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?*

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If "Yes", please explain when the employee is planning to render services, while on annual leave, compensatory time, or on their own time?

If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person will be performing or producing the services which you will be contracted to provide under this contract, you must disclose the identity of each such person in your response to this RFP, and specify the services that each person will be expected to perform.

Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP must also be disclosed.

Does any of the above apply to your company?

Yes		No	X
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**CHOICE** Administrators has no open or pending litigation initiated by the company or where it is a defendant in a customer matter.

If "Yes", please provide the following information. Table can be duplicated for each issue being identified.

Question	Response	
<b>Date of alleged contract failure or breach:</b>		
<b>Parties involved:</b>		
<b>Description of the contract failure, contract breach, litigation, or investigation, including the products or services involved:</b>		
<b>Amount in controversy:</b>		
<b>Resolution or current status of the dispute:</b>		
<b>If the matter has resulted in a court case:</b>	<b>Court</b>	<b>Case Number</b>
<b>Status of the litigation:</b>		

Vendors must review the insurance requirements specified in Attachment E, Insurance Schedule for RFP 2023. Does your organization currently have or will your organization be able to provide the insurance requirements as specified in Attachment E.

Yes		No	X
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**CHOICE** Administrators' exceptions to the insurance requirements are included in Attachment B, as requested in the RFP.

Any exceptions to the insurance requirements must be identified on Attachment B, Technical Proposal Certification of Compliance with Terms and Conditions of RFP. In order for any exceptions to the insurance requirements to be considered they must be documented in detail in Attachment B. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission.

Upon contract award, the successful vendor must provide the Certificate of Insurance identifying the coverage as specified in Attachment E, Insurance Schedule for RFP 2023.

Company background/history and why vendor is qualified to provide the services described in this RFP. Limit response to no more than five (5) pages.

## Company Background and History

Since 1985, Word & Brown Insurance Companies – the parent company of **CHOICE** Administrators – have developed and marketed innovative sales tools and quoting systems that assist brokers in identifying the best health plan options for small employer groups. In 1994, Word & Brown began developing an

employee-choice health purchasing alliance, modeled after large-group and government employee plans that provide multiple options under one program. In 1996, *CHOICE* Administrators was approved by the California Department of Corporations and became the first private, multi-plan health insurance exchange available to in-state small groups.

## **Business Operations Overview**

*CHOICE* Administrators offers the most comprehensive array of HIX services available in the industry when it comes to evaluating, selecting, and administering insurance for individuals and small groups. Their easily deployed platforms allow for seamless integration throughout every phase of the health insurance lifecycle for any consumer. *CHOICE* Administrators' Exchange services make purchasing insurance easier for employers and individuals by providing: a single application process, side-by-side comparison quotes, enrollment coordination, and ongoing service and support.

Exchange services offered by *CHOICE* Administrators include:

- Separate and integrated exchange options for individuals and small groups
- Individual, family, and group coverage quotes, enrollment, servicing, and administration
- Ability to administer subsidies or link to subsidized programs
- Medicaid presumptive eligibility and enrollment systems
- Provide consumers interoperability between plans or programs (public to private)
- Integrated ancillary solutions (dental, vision, chiropractic, life, COBRA, and FSA benefits)
- Enrollment management
- Training, education, and call center services
- Premium remittance, billing, and collection
- Life event updates (births, marriages, etc.)
- Supported broker/navigator functions
- Underwriting

## ***Narrative Project Description***

*CHOICE* Administrators, through its CaliforniaChoice® program, has experience in creating and administering integrated health insurance exchange models in the nation's most populous state. *CHOICE* Administrators administers multiple small- and large-group programs as highlighted in Table VIII-7, *CHOICE* Administrators Programs.

Table VIII-7. CHOICE Administrators Programs	
Program	Description
CaliforniaChoice®	A private group Exchange program established in 1996, CaliforniaChoice® has separate platforms for the markets of 2 to 50 employees and 51 to 199 employees. Elements include: complete marketing and enrollment materials; Web sites; forms and collateral; broker training; quoting; enrollment (online and paper); consumer support tools for plan selection, including budget worksheets; cross-referenced provider and formulary look-ups/searches; disease management program comparisons; consolidated and itemized billing and remittance to health, dental, vision, and chiropractic plans; daily electronic eligibility plan updates; member service in 150 languages; ongoing group administration; new hire and terminations processing; and complete open enrollment renewal management.
CaliforniaChoice 51+	This provides health insurance benefits through defined contribution for employers with 51 to 199 employees.
CHOICE Builder®	This provides employers with 2 to 99 employees the access to eight ancillary carriers, employer sponsored voluntary plans, dental, vision, chiropractic, acupuncture, life, and Section 125 plans.
Kaiser Permanente CHOICE Solution	This offers 10 of the most flexible Kaiser Permanente benefit plan designs, including HSA-qualified high deductible high insurance plans (HDHPs), dental, life, and Section 125.
HSA California®	This provides employers with 2 to 50 employees with access to 3 health plans, 7 HSA-compatible plan designs, dental, vision, hearing, wellness, life, and Human Resources support.
Contractor's CHOICE®	This program for contractors allows for prevailing wage-hour bank accounting and monthly billing services that include 4 health plans and more than 20 benefit plan designs.

*Length of time vendor has been providing services described in this RFP to the public and/or private sector. Please provide a brief description.*

CHOICE Administrators has supported integrated and proven exchange models since 1996 and is currently serving more than 10,000 employers and 150,000 members. Their turnkey solutions provide states the quick, efficient, and cost-effective means to establish and operate an exchange that attracts consumers, employer interest, and enrollment.

*Financial information and documentation to be included in Part III, Confidential Financial of vendor's response in accordance with Section 12.5, Part III – Confidential Financial.*

- Dun and Bradstreet Number
- Federal Tax Identification Number
- The last two (2) years and current year interim:
  - A. Profit and Loss Statement
  - B. Balance Statement

CHOICE Administrators is a privately held company and, as such, an annual audited financial statement such as Form 10-K is not available to the public. Their annual financial statement is certified by BDO USA, LLP. The financial statement includes an income statement, balance sheet, and cash flow numbers that demonstrate financial stability. CHOICE Administrators, at the Exchange's request, will provide a sealed financial statement for review. CHOICE Administrators has had no claims of bankruptcy, receivership, failure to fulfill contracts, or criminal legal actions during the past five years.



## KPMG

### Corporate Information

KPMG is an industry leader in thought leadership and policy development. It has published more than 20 thought leadership pieces related to healthcare reform within the last 12 months. KPMG has conducted five healthcare transformation sharing forums nationwide, bringing together representatives from government, payors, providers, pharmaceutical companies, etc. to discuss the impacts of healthcare reform and share thoughts on how these constituencies can work together to ease the burden of implementation. Finally, they have stayed on top of the Federal rule-making process and their Office of Government Affairs keeps their teams informed of new developments in real time. Nevada will gain direct access to all this insight and knowledge if the Xerox Team is selected for this engagement.

Starting in late 2009, KPMG formed a national task force composed of more than 40 partners and managers to understand, digest, and analyze the impact of the ACA and associated legislation. Their task force includes a cross-industry component to help ensure the alignment of delivery across the impacted domains, including government and private sector payors and providers. Within days of the legislation's enactment, KPMG analyzed the bills and identified more than 200 separate provisions impacting their state and local government clients. In addition, they performed in-depth analysis of the cost impact of the ACA and were among the first to point out that Congressional Budget Office estimates likely understated the potential impact on Medicaid enrollments—a fact later supported by the Kaiser Foundation. Since that time, they have met with more than 30 states (more than once on many) to share information and gather perspectives from their clients.

*Vendors must provide a company profile in the table format below.*

### Company Profile

Table VIII-8 details KPMG's company profile.

Table VIII-8. KPMG LLP Company Profile	
Question	Response
Company name:	KPMG LLP
Ownership:	Limited liability partnership
State of Incorporation:	Delaware
Date of Incorporation:	August 15, 1994
No. of years in the business	KPMG LLP traces its origins back to 1897 and has been a Delaware registered limited liability partnership since 1994.
List of top officers	John Veihmeyer, Chairman and CEO Henry Keizer, Deputy Chairman and COO
Location of company headquarters:	KPMG LLP, 345 Park Avenue, New York, NY 10154

Table VIII-8. KPMG LLP Company Profile	
Question	Response
Location(s) of company offices:	KPMG LLP (Public Sector West hub) 400 Capitol Mall Suite 800 Sacramento, CA 95814  KPMG LLP (Nevada office) 3960 Howard Hughes Parkway Suite 430 Las Vegas, NV 89169
Location(s) of the office that will provide the services described in this RFP:	Sacramento, CA Site – TBD
Number of employees locally with the expertise to support the requirements identified in this RFP:	50
Number of employees nationally with the expertise to support the requirements in this RFP:	850
Location(s) from which employees will be assigned for this project:	Sacramento, CA; Seattle, WA; San Francisco, CA; Los Angeles, CA

*Please be advised, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state must register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.*

KPMG is still registered in the State of Nevada at the time of this RFP submission.

*The selected vendor, prior to doing business in the State of Nevada, must be appropriately licensed by the State of Nevada, Secretary of State's Office pursuant to NRS76. Information regarding the Nevada Business License can be located at <http://sos.state.nv.us>.*

Table VIII-9 shows the Nevada Business License of KPMG.

Table VIII-9. State of Nevada License	
Question	Response
Nevada Business License Number:	Nevada CPA Licensee Information: PART-0628 TID No: 020-TX 1002671876 Nevada Business ID No: NV20111353640
Legal Entity Name:	KPMG LLP

*Is "Legal Entity Name" the same name as vendor is doing business as?*

Yes	<b>X</b>	No	
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*Vendors are cautioned that some services may contain licensing requirement(s). Vendors shall be proactive in verification of these requirements prior to proposal submittal. Proposals that do not contain the requisite licensure may be deemed non-responsive.*

*Has the vendor ever been engaged under contract by any State of Nevada agency?*

Yes	X	No	
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*If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.*

Table VIII-10. State of Nevada Contracts	
Question	Response
Name of State Agency:	Nevada Department of Transportation
State Agency Contact Name:	Jenica Finnerty
Dates when services were performed:	2009-present
Type of duties performed:	Pioneer Program Financial Advisory Services
Total dollar value of the contract:	\$178,500

Table VIII-11. State of Nevada Contracts	
Question	Response
Name of State Agency:	University of Nevada
State Agency Contact Name:	Unavailable
Dates when services were performed:	1999-2000
Type of duties performed:	Tax services
Total dollar value of the contract:	\$75,000

*Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?*

Yes		No	X
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*If "Yes", please explain when the employee is planning to render services, while on annual leave, compensatory time, or on their own time?*

*If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person will be performing or producing the services which you will be contracted to provide under this contract, you must disclose the identity of each such person in your response to this RFP, and specify the services that each person will be expected to perform.*

*Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP must also be disclosed.*

Does any of the above apply to your company?

Yes		No	X
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KPMG is a nationwide accounting firm and works on thousands of engagements each year across the country. KPMG does not formally track contract terminations for cause or declarations of default. As is the case with other major accounting firms, from time to time KPMG may receive a question or complaint from a client about the conduct of a particular engagement. KPMG attempts to promptly address and resolve issues with clients so that clients do not invoke contractual termination or default clauses. KPMG is not aware of any significant issues, relating to contracts with other clients, or any terminations of those contacts, which would present any concerns with respect to KPMG's ability to successfully perform the services contemplated by this proposal.

If "Yes", please provide the following information. Table can be duplicated for each issue being identified.

Question	Response	
Date of alleged contract failure or breach:		
Parties involved:		
Description of the contract failure, contract breach, litigation, or investigation, including the products or services involved:		
Amount in controversy:		
Resolution or current status of the dispute:		
If the matter has resulted in a court case:	Court	Case Number
Status of the litigation:		

Vendors must review the insurance requirements specified in Attachment E, Insurance Schedule for RFP 2023. Does your organization currently have or will your organization be able to provide the insurance requirements as specified in Attachment E.

Yes		No	X
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KPMG's exceptions to the insurance requirements are included in Attachment B, as requested in the RFP.

Any exceptions to the insurance requirements must be identified on Attachment B, Technical Proposal Certification of Compliance with Terms and Conditions of RFP. In order for any exceptions to the insurance requirements to be considered they must be documented in detail in Attachment B. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission.

Upon contract award, the successful vendor must provide the Certificate of Insurance identifying the coverage as specified in Attachment E, Insurance Schedule for RFP 2023.

Company background/history and why vendor is qualified to provide the services described in this RFP. Limit response to no more than five (5) pages.

## Company Background and History

KPMG International (KPMG) is a global network of professional firms providing audit, tax, and advisory services, tracing its origins back to 1897. It operates in 146 countries and has more than 140,000 professionals, including 7,900 partners, working in member firms around the world. KPMG LLP, the United States member firm of KPMG International, has been a limited liability partnership since 1994 and has more than 23,000 professionals in 87 offices across all 50 states, including more than 1,800 partners.

With a strong growth record over the past decade, KPMG member firms offer clients the scale, global reach, industry insight, and multidisciplinary range of services required by the Exchange.

## **Project Management Experience**

KPMG offers over 15 years of project management and quality assurance experience on large, complex, and significant system integration projects like the Exchange project. KPMG is a recognized market leader in the delivery of quality assurance (QA) services to large complex government clients such as the federal government, California, New Jersey, and the state and city of New York. In recent years, KPMG has been selected as the QA advisor on many of the larger and more complex system initiatives undertaken by New York, including the Medicaid Data Warehouse, the Payroll System Upgrade, the Statewide Financial System, the Welfare Management System, the NYC Financial Management System, and the NYC HHS-Connect Program. Their QA experience includes projects where the scope included project monitoring, project management/mentoring, requirements definition, selection assistance, enterprise architecture, information security, and/or cost allocation.

## **Relevant Experience, Capabilities, and Successes**

KPMG is an industry leader in knowledge and experience when it comes to health and human services (HHS) initiatives. In particular, KPMG is a leader in providing IT advisory services in the HHS arena, providing services to Massachusetts, New Jersey, Indiana, California, New York, and New York City. We currently review federal compliance for more than 40 percent of all federal HHS program dollars expended—four times that of our nearest competitor. We describe KPMG’s relevant experience under the following headings:

- KPMG Health Care Exchange Systems
- KPMG Multiple Entity Government Systems
- KPMG Experience in Technology Advisory Services

### ***Multiple Entity Government Systems***

With more than 80 years of experience serving many of the larger and more complex clients in the public sector, KPMG’s government practice has long been a leader in professional services for government. KPMG performs single audits for many states and healthcare providers, including California, Illinois, Massachusetts, New Hampshire, New Jersey, New Mexico, Texas, and Vermont. In the U.S. alone, KPMG has more than 1,426 advisory professionals holding an advanced certification relevant to project quality assurance or independent verification and validation (IV&V) such as Six Sigma, CMMI, CISA, CISSP, CPAM, etc., including more than 400 project management professionals (PMPs).

### ***Experience in Technology Advisory Services***

KPMG has long been a leading provider of technology advisory services, including having provided quality review for technology and its application in business environments for more than 15 years. We currently review federal compliance for more than 25 percent of all federal health and social service dollars expended—three times that of our nearest competitor.

## IT Security and HIPAA Compliance

KPMG has experience in performing information security assessments based in a methodology derived from industry-accepted security and control methodologies such as ISO17799 (BS7799) and is compliant with the HITECH act requirements.

## Narrative Project Description

KPMG has extensive experience working with government customers to design and plan for exchange environments, as shown in Table V111-12, KPMG Narrative Project Descriptions. This national experience provides the Exchange project with thought leadership as the Exchange is developed and implemented.

Table VIII-12. KPMG Narrative Project Descriptions		
Project	Role/Responsibilities (as Prime or Sub)	Scope of Effort
State of Missouri – Health Insurance Exchange Planning Assistance	KPMG served as part of a team in support of the State's Health Insurance Exchange Coordinating Committee and its Medicaid Office to conduct an assessment. Its assessment primarily focused on the business and operational readiness of existing state systems, and the functionality of such systems in an exchange environment.	Conducted a study of the requirements for a SHOP exchange Developed a five-year administrative budget, including support in the development of Level 1 establishment grant Completed an IT gap analysis for exchange
Commonwealth of Massachusetts – Healthcare Connector	KPMG assisted the Commonwealth of Massachusetts in its efforts to develop and implement its health benefits exchange.	Developed Requirements Traceability Matrix (RTM) to facilitate gap analysis Assisted the Connector in development of a high-level roadmap to inform the Connector's decision-making process Provided IV&V services to assist with assessing the selected and incumbent Vendors' transition plans, project plans, timeline, and milestones
Commonwealth of Pennsylvania – Health Insurance Exchange Planning Assistance	KPMG assessed the current staff and information technology available to support Exchange planning and implementation.	Assisted with exchange governance options Modeled potential frameworks for business operations
State of California Department of Health Services – Process and Technology Assessment	KPMG conducted an assessment and analysis of the Medi-Cal Provider Enrollment Branch (PEB) business process and supporting technologies for the Department of Health Services.	Provided technical assessment of PEB business processes, associated workflows, and organizational constructs, including staffing ratios and skill sets used to meet business objectives Determined the adequacy of existing systems and databases to support PEB business processes Identified costs associated with acquiring the proposed enabling technologies necessary to automate, among others, PEB's statewide Medi-Cal provider enrollment functions

**Table VIII-12. KPMG Narrative Project Descriptions**

Project	Role/Responsibilities (as Prime or Sub)	Scope of Effort
State of New York – Department of Health, Office of Health Insurance Programs, Medicaid Warehouse Quality Assurance	KPMG is providing quality assurance services to New York State Department of Health (NYSDOH) for their Medicaid Data Warehouse Replacement and OHIP Data Mart Operational Support.	Assessed completeness and accuracy of compliance and operational reports generated by the data warehouse for the Medicaid program and its policy reviews, to ensure program integrity

*Length of time vendor has been providing services described in this RFP to the public and/or private sector. Please provide a brief description.*

KPMG is a leader in implementing several health benefits exchange planning efforts across the country. KPMG’s work in this area dates back to 2007 when it provided services to Massachusetts as part of the implementation of their HIX, known as the Massachusetts Health Connector. Since the adoption of the ACA, its work in this area has expanded to include many other HIX models with active engagements in Pennsylvania, Ohio, Oregon, New Jersey, Wisconsin, California, Rhode Island, and Missouri. In these states, KPMG has conducted scopes of work including performing gap analysis for IT and business processes, providing plans and roadmaps, and assisting with the development of grant applications. As just one example, with the assistance of KPMG, Missouri was recently awarded one of the largest Level 1 grants and received the highest-rated grant application in the most recent round.

KPMG has significant experience with healthcare reform and has conducted a number of relevant projects at the State level with the Early Innovator states, including the Commonwealth of Massachusetts. KPMG assisted the Commonwealth of Massachusetts in the development and implementation of its health benefits exchange. This successful project has reduced the uninsured in Massachusetts from a peak of 11.7 percent in 2004 to 1.9 percent in 2011.

*Financial information and documentation to be included in Part III, Confidential Financial of vendor’s response in accordance with Section 12.5, Part III – Confidential Financial.*

- *Dun and Bradstreet Number*
- *Federal Tax Identification Number*
- *The last two (2) years and current year interim:*
  - A. *Profit and Loss Statement*
  - B. *Balance Statement*

As of September 30, 2011, the end of KPMG’s most recent fiscal year, KPMG LLP reported total revenue of \$5.361 billion. By all the key financial measures of the firm, these results reflect continued financial stability. This fundamental strength allows KPMG to make the necessary investments in the people and technology that keep it at the forefront in professional services. KPMG’s operations are characterized by strong annual financial results, a diversified client base, and strong leadership possessing the vision to direct the firm into the future. To support these statements, KPMG has provided condensed balance sheets and financial documents in Tab II, Financial Information and Documentation, which is included in Part III, Confidential Financial, of this proposal. KPMG neither produce a profit and loss statement nor prepare interim year balance sheets. These documents are highly confidential.

*6.2.1.5 Business references as specified in Section 6.3, Business References must be provided for any proposed subcontractors.*

Refer to Section VIII.3, Business References, for the business references provided by *CHOICE* Administrators and KPMG.

*6.2.1.6 Provide the same information for any proposed subcontractor staff as specified in Section 6.4, Vendor Staff Skills and Experience Required.*

Refer to Section VIII.4, Vendor Staff Skills and Experience, for the summary of skills and experience of *CHOICE* Administrators and KPMG staff assigned to the Exchange project.

*6.2.1.7 Staff resumes for any proposed subcontractors as specified in Section 6.5, Vendor Staff Resumes.*

Refer to Section IX, Proposed Staff Resume (s), for the resumes of *CHOICE* Administrators and KPMG staff assigned to the Exchange project.

*6.2.1.8 Vendor shall not allow any subcontractor to commence work until all insurance required of the subcontractor is provided to the vendor.*

Our partners will provide all of the required insurance before commencing work for the Exchange.

*6.2.1.9 Vendor must notify the using agency of the intended use of any subcontractors not identified within their original proposal and provide the information originally requested in the RFP in Section 6.2, Subcontractor Information. The vendor must receive agency approval prior to subcontractor commencing work.*

We will notify the State of Nevada Purchasing Division if we intend to use any subcontractor not identified within this proposal and provide the information as requested in RFP Section 6.2, Subcontractor Information.

*6.2.1.10 All subcontractor employees assigned to the project must be authorized to work in this country.*

All subcontractor employees assigned to the Exchange are authorized to work in the United States of America.

## VIII.3 Business References

*REQUIREMENT: RFP Section 6.3, pg. 74*

*The Xerox Team offers Nevada the flexibility, knowledge, and reliability of a partner whose past performance exemplifies the kind of consultative spirit needed to bring healthcare reform to Exchange consumers.*

The Exchange requires a vendor that can effectively complete the tasks referenced in the RFP and can also serve as a flexible and collaborative partner to rely on as the landscape of healthcare changes. One of the best indicators of performance is past experience.

*6.3.1 Vendors should provide a minimum of three (3) business references from similar projects performed for private, state and/or large local government clients within the last five (5) years.*

The Xerox Team acknowledges and accepts RFP requirement 6.3.1. Reference details are provided in Table VIII-13, Business References.



**6.3.2 Business references must show a proven ability of:**

**6.3.2.1 Significant experience in designing, developing, and/or implementing functionality that the Silver State Health Insurance Exchange is seeking to acquire through this RFP;**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.1. Reference details are provided in RFP Section 6.3.7.

**6.3.2.2 Offering functionality that the Silver State Health Insurance Exchange is seeking on a Software as a Service (SaaS) basis;**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.2. Reference details are provided in RFP Section 6.3.7.

**6.3.2.3 Implementing and operating a Call Center;**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.3. Reference details are provided in RFP Section 6.3.7.

**6.3.2.4 Developing and executing a comprehensive application test plan;**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.4. Reference details are provided in RFP Section 6.3.7.

**6.3.2.5 Developing and implementing a comprehensive training plan;**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.5. Reference details are provided in RFP Section 6.3.7.

**6.3.2.6 Experience with managing subcontractors; and**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.6. Reference details are provided in RFP Section 6.3.7.

**6.3.2.7 Development and execution of a comprehensive project management plan.**

The Xerox Team acknowledges and accepts RFP requirement 6.3.2.7. Reference details are provided in RFP Section 6.3.7.

**6.3.3 Vendors must provide the following information for every business reference provided by the vendor and/or subcontractor:**

*The "Company Name" must be the name of the proposing vendor or the vendor's proposed subcontractor.*

As a leading provider of healthcare consulting and business process outsourcing services nationwide, the Xerox Team has extensive experience working with commercial and state government clients in developing, implementing, and administering healthcare programs. We present the Exchange with references from satisfied customers whom we have served.

As requested by the Exchange, we provide references for each Xerox Team member—Xerox, *CHOICE* Administrators, and KPMG, in Table VIII-13, Business References. For each reference, we provide contact information along with an overview of the scope of services that demonstrates our ability to provide the services described in the RFP.

Table VIII-13. Business References	
Xerox Reference #1	
Reference #:	1
Company Name:	Xerox State Healthcare, LLC
Identify role company will have for this RFP project (check one):	
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input checked="" type="checkbox"/> Vendor         </div> <div style="text-align: center;"> <input type="checkbox"/> Subcontractor         </div> </div>	
Project Name:	Connecticut HUSKY, Charter Oak, and CT Pre-existing Condition
<b>Primary Contact Information</b>	
Name:	Kristin Dowty/Health Program Associate
Street Address:	Department of Social Services 25 Sigourney Street
City, State, Zip	Hartford, CT 06106-5033
Phone, including area code:	(860) 424-4805
Facsimile, including area code:	(860) 424-4958
Email address:	<a href="mailto:kristin.dowty@ct.gov">kristin.dowty@ct.gov</a>
<b>Alternate Contact Information</b>	
Name:	Dr. Mark Schaefer/Director, Medical Care Administration
Street Address:	Department of Social Services 25 Sigourney Street
City, State, Zip	Hartford, CT 06106-5033
Phone, including area code:	(860) 424-5067
Facsimile, including area code:	(860) 424-5114
Email address:	<a href="mailto:mark.schaefer@ct.gov">mark.schaefer@ct.gov</a>
<b>Project Information</b>	
Brief description of the project/contract and description of services performed:	<p>In 1995, the Department of Social Services (DSS), awarded Xerox a contract to administer the enrollment broker contract for Connecticut's HUSKY (Healthcare for Uninsured Kids and Youth) managed care programs. The HUSKY Medicaid Enrollment Broker Program was one of the first programs of its kind in the nation and was the first to offer telephone-based managed care enrollment without requiring a signed form. In 1998, under a contract amendment, we designed and implemented the HUSKY B Eligibility Program, one of the first CHIP programs in the nation. Both programs were implemented on time and within budget. In July 2008, DSS amended our contract to include the Charter Oak Program. Under this contract, we process applications, determine eligibility and premiums, and enroll uninsured, non-Medicaid eligible adults.</p> <p>For both contracts, we employed an aggressive marketing and outreach campaign that included marketing collaterals, such as informational brochures and educational videotapes, community partnerships, and public presentations. For HUSKY A, our choice rate averaged 90 percent during the first year of rollout. For HUSKY B, we enrolled approximately 4,000 children during the first 12 months and currently serve 16,000 enrollees. Net enrollment for both programs has increased every year under our administration.</p>

**Table VIII-13. Business References**

Xerox Reference #1	
	<ul style="list-style-type: none"> <li>• Designed, developed, and implemented eligibility/enrollment/application tracking/contact management system</li> <li>• Application screening and processing</li> <li>• Eligibility determination and enrollment for CHIP</li> <li>• Enrollment for Medicaid</li> <li>• Customer service call center with translation</li> <li>• Choice counseling</li> <li>• Case management/maintenance</li> <li>• Premium processing</li> <li>• Health plan capitation payment processing</li> <li>• Program materials development and distribution</li> <li>• Print and mail fulfillment</li> <li>• Complaints/grievances/appeals</li> <li>• Continuous Quality Improvement program</li> <li>• Training</li> <li>• Reporting</li> <li>• Program consulting/support</li> </ul>
Original Project/Contract Start Date:	June 1995
Original Project/Contract End Date:	January 2007
Original Project/Contract Value:	\$30.8 Million
Final Project/Contract Date:	December 2013
Was project/contract completed in time originally allotted, and if not, why not?	Yes, initial project and subsequent implementations have been completed on a timely basis.
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes, initial project and subsequent implementations have been completed within budget, with adjustments as required for scope or volume (actual vs. projected) changes.

Xerox Reference #2	
Reference #:	2
Company Name:	Xerox State Healthcare, LLC
Identify role company will have for this RFP project (check one):	
<input checked="" type="checkbox"/>	Vendor
<input type="checkbox"/>	Subcontractor
Project Name:	Mississippi MMIS/DSS and FAS
Primary Contact Information	
Name:	Rita Rutland
Street Address:	550 High Street, Suite 1000
City, State, Zip	Jackson, MS 39201
Phone, including area code:	(601) 576-4147
Facsimile, including area code:	(601) 576-4151
Email address:	rita.rutland@medicaid.ms.gov
Alternate Contact Information	
Name:	Peter Montgomery
Street Address:	550 High Street, Suite 1000
City, State, Zip	Jackson, MS 39201
Phone, including area code:	(601) 576-4149
Facsimile, including area code:	(601) 359-6294
Email address:	peter.montgomery@medicaid.ms.gov
Project Information	
Brief description of the project/contract and description of services performed:	<p>Xerox is currently fulfilling a third consecutive contract with the Mississippi Division of Medicaid as the State's MMIS/FAS/PBM/DSS contractor. In March 2001, the Mississippi Division of Medicaid awarded Xerox a contract to take over, enhance, and operate the legacy First Health Services Corporation MMIS and provide full fiscal agent services. In October 2003, we implemented a Xerox-developed replacement MMIS. Xerox also took over an Electronic Data Systems (EDS, now Hewlett Packard (HP)) POS system and then implemented our PBM system in October 2003 according to schedule. Under our second contract, we implemented 14 MMIS enhancements on time and on budget including National Provider Identification (NPI); UB-04; a complete replacement of the Web portal; and the integration of a condition-based edits engine. Xerox also provides prescription benefits management services for Mississippi Medicaid. We currently provide the following FAS and pharmacy services:</p> <ul style="list-style-type: none"> <li>• Claim processing/scanning/document management</li> <li>• Provider credentialing, enrollment, training</li> <li>• Provider outreach</li> <li>• Customer services</li> <li>• Recipient enrollment,</li> <li>• Provider and recipient call centers</li> <li>• Fraud/abuse detection</li> <li>• Banking reconciliations</li> <li>• MARS</li> <li>• SURS/FADS</li> <li>• DUR</li> <li>• Pharmacy/therapeutics</li> </ul>

Xerox Reference #2	
	education, and monitoring committee • Provider Web portal • Drug rebate • EIS/DSS
Original Project/Contract Start Date:	January 2002
Original Project/Contract End Date:	December 2006
Original Project/Contract Value:	First Contract: \$173M; Second Contract: \$136M (includes 18-month extension)
Final Project/Contract Date:	June 2014
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

Xerox Reference #3	
Reference #:	3
Company Name:	Xerox State Healthcare, LLC
Identify role company will have for this RFP project (check one):	
<input checked="" type="checkbox"/>	Vendor
<input type="checkbox"/>	Subcontractor
Project Name:	New Mexico MMIS/DSS and FAS
Primary Contact Information	
Name:	Robert Stevens
Street Address:	P.O. Box 2348
City, State, Zip	Santa Fe, NM 87504-2348
Phone, including area code:	(505) 827-6207
Facsimile, including area code:	(505) 827-3196
Email address:	robert.stevens@state.nm.us
Alternate Contact Information	
Name:	Mark Pitcock
Street Address:	P.O. Box 2348
City, State, Zip	Santa Fe, NM 87504-2348
Phone, including area code:	(505) 827-1344
Facsimile, including area code:	(505) 827-3185
Email address:	mark.pitcock@state.nm.us
Project Information	
Brief description of the project/contract and description of services performed:	<p>The account provides fiscal agent and other services including claims processing, claims payment, staff training for the customer, provider relations activities, call center operations, managing, maintaining, and modifying the MMIS, managing, maintaining, and developing a Web portal, operating DRAMS and the PBM system, providing advice and recommendations on actions that can reduce cost and improve the delivery of Medicaid services for providers and beneficiaries, enrolling providers, operating a mail room function, operating the Mi Via waiver program, and conducting special projects as requested including HIPAA remediation and other federally mandated system changes that impact the MMIS. The account also manages and maintains the Medical Assistance Division LAN.</p> <p>This project included the takeover of the existing First Health-developed NM MMIS, including fiscal agent services, Medicaid claims processing and adjudication, MMIS maintenance, and experience with managed care programs for Medicaid recipients. Features included:</p> <ul style="list-style-type: none"> <li>• NM MMIS legacy system maintained certification and the replacement system was certified in 2002</li> <li>• Implementation of managed care component based on transfer of Xerox's WA MMIS managed care subsystem</li> <li>• Implementation of Xerox-developed MMIS after initial takeover of legacy MMIS</li> <li>• Implementation of Xerox's point-of-sale pharmacy claims processing system</li> </ul>

Xerox Reference #3	
Original Project/Contract Start Date:	June 1994
Original Project/Contract End Date:	May 2010
Original Project/Contract Value:	\$119 Million 1 <sup>st</sup> ; \$125 Million for 2 <sup>nd</sup> ; \$160 Million for 3rd
Final Project/Contract Date:	May 2019
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

Xerox Reference #4	
Reference #:	4
Company Name:	Xerox State Healthcare, LLC
Identify role company will have for this RFP project (check one):	
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input checked="" type="checkbox"/> Vendor </div> <div style="text-align: center;"> <input type="checkbox"/> Subcontractor </div> </div>	
Project Name:	Virginia Family Access to Medical Insurance Security (FAMIS)
Primary Contact Information	
Name:	Janice Holmes/ CHIP Program Manager
Street Address:	Department of Medical Assistance Services 600 E Broad Street, Suite 1300
City, State, Zip	Richmond, VA 23219
Phone, including area code:	(804) 225-4280
Facsimile, including area code:	(804) 225-3961
Email address:	janice.holmes@dmass.virginia.gov
Alternate Contact Information	
Name:	Rebecca Mendoza/Director, Maternal and Child Health
Street Address:	Department of Medical Assistance Services 600 E Broad Street, Suite 1300
City, State, Zip	Richmond, VA 23219
Phone, including area code:	(804) 786-3206
Facsimile, including area code:	(804) 225-3961
Email address:	rebecca.mendoza@dmass.virginia.gov
Project Information	
Brief description of the project/contract and description of services performed:	<p>In 2001, the Virginia Department of Medical Assistance Services (DMAS) awarded Xerox a contract to administer eligibility determination and enrollment services for the families and children of the CHIP program. We converted all beneficiary data from the MMIS to the FAMIS eligibility system and immediately began full re-determination processing for all beneficiaries. We implemented this project in 90 days, on time and within budget.</p> <ul style="list-style-type: none"> <li>• Application screening and processing</li> <li>• Eligibility determination and enrollment for CHIP</li> <li>• Customer service call center with translation</li> <li>• Choice counseling</li> <li>• Case management/maintenance</li> <li>• Program materials development and distribution</li> <li>• Print and mail fulfillment</li> <li>• Website development and management</li> <li>• Beneficiary satisfaction surveys</li> <li>• Complaints/grievances/appeals</li> <li>• Continuous quality improvement program</li> <li>• Reporting</li> </ul>



Xerox Reference #4	
	<ul style="list-style-type: none"> <li>• Program consulting/support</li> <li>• Implemented Website for Hurricane Katrina refugees within one week of request</li> </ul>
Original Project/Contract Start Date:	2001
Original Project/Contract End Date:	July 2007
Original Project/Contract Value:	\$11.5 Million
Final Project/Contract Date:	Current Contract awarded began in August 2007 to present. Contract value is \$25.1 Million
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

Xerox Reference #5	
Reference #:	5
Company Name:	Xerox State Healthcare, LLC
Identify role company will have for this RFP project (check one):	
<input checked="" type="checkbox"/>	Vendor
<input type="checkbox"/>	Subcontractor
Project Name:	Wyoming MMIS/DSS and FAS
Primary Contact Information	
Name:	Debbie Paiz/Systems Manager
Street Address:	6101 Yellowstone Road, Suite 210
City, State, Zip	Cheyenne, WY 82002
Phone, including area code:	(307) 777-7531
Facsimile, including area code:	(307) 777-6964
Email address:	debbie.paiz@wyo.gov
Alternate Contact Information	
Name:	Debbie Paiz
Street Address:	6101 Yellowstone Road, Suite 210
City, State, Zip	Cheyenne, WY 82002
Phone, including area code:	(307) 777-7531
Facsimile, including area code:	(307) 777-6964
Email address:	debbie.paiz@wyo.gov
Project Information	
Brief description of the project/contract and description of services performed:	<p>Xerox's original contract with Wyoming began in 1993 with transfer and enhancement of the Florida MMIS and the responsibility for fiscal agent services. In 1995 Xerox successfully implemented its prescription drug claims system to receive pharmacy point-of-sale claim transactions for the Wyoming Medicaid account. We perform a full range of pharmacy benefits management services.</p> <p>In 2000, the Wyoming Department of Health, Office of HealthCare Financing awarded Xerox a second contract to serve as fiscal agent and to implement major enhancements to the Wyoming MMIS, including GUI, imaging capability, Web-enabled technology, benefit file plan, Medicare Buy-In, and enhanced drug rebate using DRAMS (drug rebate was part of the original FA work) drug rebate processing, including invoicing, dispute resolution, and rebate agreement administration. the PBM contract expired in May 2009, we also processed pharmacy claims as part of the MMIS contract. In 1995, we completed the DDI phase of our POS system for Wyoming and used this system until contract expiration.</p> <p>We are currently fulfilling a third consecutive contract to provide the Wyoming Department of Health and Social Services full fiscal agent services and MMIS maintenance and support. At the start of this contract in November 2008, Xerox began a major improvement project that involved 24 major system enhancements successfully implemented in October 2009.</p> <ul style="list-style-type: none"> <li>• Claims processing</li> <li>• Training and publications</li> </ul>

Xerox Reference #5	
	<ul style="list-style-type: none"> <li>• Claims scanning/document management</li> <li>• Provider credentialing</li> <li>• Provider outreach</li> <li>• J-Code rebate administration</li> <li>• Customer services</li> <li>• Medical review</li> <li>• Provider and Client Web portal</li> <li>• Provider and recipient call centers</li> <li>• ID cards</li> <li>• Fraud/abuse detection</li> <li>• Medicare buy-in</li> <li>• Beneficiary outreach</li> <li>• Lock-in program</li> <li>• Non-emergency transportation</li> <li>• REOMB</li> <li>• Management and Administrative Reporting (MARS)</li> <li>• SURS/FADS</li> <li>• Eligibility verification</li> <li>• eFADS/DSS</li> <li>• Subrogation and Estate Recovery</li> </ul>
Original Project/Contract Start Date:	November 1993
Original Project/Contract End Date:	June 2000
Original Project/Contract Value:	\$47.9 Million
Final Project/Contract Date:	June 2013
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

<b>CHOICE Administrators Reference #1</b>	
Reference #:	1
Company Name:	CHOICE Administrators
Identify role company will have for this RFP project (check one):	
<div style="display: inline-block; text-align: center;"> <div style="font-size: 1.5em;">↑</div> <div>Vendor</div> </div> <div style="display: inline-block; text-align: center; margin-left: 100px;"> <div style="font-size: 1.5em;">X</div> <div>Subcontractor</div> </div>	
Project Name:	Kaiser Permanente
<b>Primary Contact Information</b>	
Name:	John Newman/Director, Exchanges and Performance Reporting
Street Address:	1800 Harrison St., 9th Floor
City, State, Zip	Oakland, CA 94612
Phone, including area code:	(510) 625-2196
Facsimile, including area code:	N/A
Email address:	john.newman@kp.org
<b>Alternate Contact Information</b>	
Name:	N/A
Street Address:	N/A
City, State, Zip	N/A
Phone, including area code:	N/A
Facsimile, including area code:	N/A
Email address:	N/A
<b>Project Information</b>	
Brief description of the project/contract and description of services performed:	Following a successful implementation and positive administrative experience in the CaliforniaChoice program, CHOICE Administrators and Kaiser Permanente joined forces to create Kaiser Permanente Choice Solution. Kaiser Permanente has remained highly selective of its business partners, which speaks volumes about the capabilities of CHOICE Administrators in Kaiser's decision to launch a second program with CHOICE Administrators. The Kaiser Permanente Choice Solution (KPCS) program launched in May of 2006 and offers 10 of the most flexible Kaiser Permanente benefit plan designs, including HSA-qualified high deductible high insurance plans (HDHPs), dental, life, and Section 125. It is tailored for employers with two to 99 employees in an employee choice and defined contribution environment.
Original Project/Contract Start Date:	October 2003
Original Project/Contract End Date:	On-going
Original Project/Contract Value:	Confidential
Final Project/Contract Date:	N/A
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

<b>CHOICE Administrators Reference #2</b>	
Reference #:	2
Company Name:	CHOICE Administrators
Identify role company will have for this RFP project (check one):	
<input type="checkbox"/> Vendor	<input checked="" type="checkbox"/> Subcontractor
Project Name:	Health Net
<b>Primary Contact Information</b>	
Name:	Alyson Stone/Manager, Small Business Group
Street Address:	5055 East Whittier Boulevard
City, State, Zip	East Los Angeles, CA 90022
Phone, including area code:	(818) 676-6220
Facsimile, including area code:	N/A
Email address:	alyson.d.greenleaf@healthnet.com
<b>Alternate Contact Information</b>	
Name:	N/A
Street Address:	N/A
City, State, Zip	N/A
Phone, including area code:	N/A
Facsimile, including area code:	N/A
Email address:	N/A
<b>Project Information</b>	
Brief description of the project/contract and description of services performed:	Like many other health plans, Health Net has a long-standing relationship with CHOICE Administrators. Health Net was one of the health plans upon the inception of the California Choice (small group) program in 1996 and the inception of the California Choice 51+ program. Over the years, the partners have collaborated to refine the programs with innovative products and services as the market has evolved.
Original Project/Contract Start Date:	1996
Original Project/Contract End Date:	On-going
Original Project/Contract Value:	Confidential
Final Project/Contract Date:	N/A
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes
<b>CHOICE Administrators Reference #3</b>	
Reference #:	3

<b>CHOICE Administrators Reference #3</b>	
Company Name:	CHOICE Administrators
Identify role company will have for this RFP project (check one):	
<input type="checkbox"/> Vendor	<input checked="" type="checkbox"/> Subcontractor
Project Name:	Anthem Blue Cross
<b>Primary Contact Information</b>	
Name:	Mark Morgan
Street Address:	2000 Corporate Center Dr.
City, State, Zip	Newbury Park, CA 91320
Phone, including area code:	(805) 713-4785
Facsimile, including area code:	N/A
Email address:	mark.morgan@wellpoint.com
<b>Alternate Contact Information</b>	
Name:	N/A
Street Address:	N/A
City, State, Zip	N/A
Phone, including area code:	N/A
Facsimile, including area code:	N/A
Email address:	N/A
<b>Project Information</b>	
Brief description of the project/contract and description of services performed:	Anthem Blue Cross joined CHOICE Administrators in 2010. Our partnership with Anthem Blue Cross is strong and offers a wide range of plans from low cost, high deductible plans to premium plans with rich benefits. These options are continually fine-tuned to enhance access to affordable, quality health care. The company, with its strong track record for innovation, focuses on progressive products and services designed to improve the health status.
Original Project/Contract Start Date:	2010
Original Project/Contract End Date:	On-going
Original Project/Contract Value:	Confidential
Final Project/Contract Date:	N/A
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

<b>KPMG Reference #1</b>	
Reference #:	1
Company Name:	KPMG
Identify role company will have for this RFP project (check one):	

KPMG Reference #1	
↑ Vendor	↑ Subcontractor <b>X</b>
Project Name:	Oregon Health Insurance Exchange IT
Primary Contact Information	
Name:	Rus Hargrave
Street Address:	3991 Fairview Industrial Drive SE
City, State, Zip	Salem, Oregon 97302
Phone, including area code:	(503) 734-4184
Facsimile, including area code:	(971) 673-0133
Email address:	rusell.hargrave@state.or.us
Alternate Contact Information	
Name:	Tracy Humphreys
Street Address:	3991 Fairview Industrial Drive SE
City, State, Zip	Salem, Oregon 97302
Phone, including area code:	(503) 945-6032
Facsimile, including area code:	(503) 378-2161
Email address:	tracey.j.humphreys@state.or.us
Project Information	
Brief description of the project/contract and description of services performed:	<p>The Oregon Health Authority's (OHA) is implementing a public health insurance exchange as part of the state's effort to comply with the Affordable Care Act. Serving as its own system integrator, OHA has selected software and service vendors to support the states effort to deploy key exchange functionality, including eligibility/enrollment, plan management, financial management, a public portal, and customer service components.</p> <p>Concurrently, Oregon Department of Human Services (DHS) is undertaking a number of Information Technology (IT) modernization projects with the intent of improving field conditions and offer online benefit applications for Oregon citizens.</p> <p>The Health Insurance Exchange IT project and the Department of Human Service's Modernization Program are jointly referred to as the MAX Program.</p> <p>As a subcontractor to Oracle, KPMG is supporting a variety of tasks under the umbrella of the MAX Program, including PMO support and HIX subject matter expertise. KPMG has also supported OHA in facilitating various CMS gate reviews and preparation for the reviews.</p>
Original Project/Contract Start Date:	July 2011; January 2012 (dual contracts)
Original Project/Contract End Date:	November 2011; July 2012
Original Project/Contract Value:	147,000; \$762,400
Final Project/Contract Date:	November 2011; ongoing
Was project/contract completed in time originally allotted, and if not, why not?	The services being provided by KPMG include a variety of project management and support throughout the MAX program and its projects' lifecycles. The contract was drafted with the understanding

KPMG Reference #1	
	that baseline PMO strategy and plan would be developed and the contract will be extended to the extent that KPMG's support executing the plan is needed.
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes. The contract is time and materials contract for MAX PMO support and subject matter expertise. The contract specifies the level of services to be provided by KPMG and the associated cost of those services.



KPMG Reference #2	
Reference #:	2
Company Name:	KPMG
Identify role company will have for this RFP project (check one):	
↑ Vendor	↑ Subcontractor X
Project Name:	NYC HHS-Connect
Primary Contact Information	
Name:	Lauren Aaronson
Street Address:	75 Park Avenue, 9th Floor
City, State, Zip	New York, NY 10007
Phone, including area code:	(718) 826-5102
Facsimile, including area code:	(718) 403-8080
Email address:	laaronson@hhsconnect.nyc.gov
Alternate Contact Information	
Name:	N/A
Street Address:	N/A
City, State, Zip	N/A
Phone, including area code:	N/A
Facsimile, including area code:	N/A
Email address:	N/A
Project Information	
Brief description of the project/contract and description of services performed:	<p>KPMG was selected as part of a team in fall 2004 to serve as the Program Management Quality Assurance (PMQA) vendor for the City's Integrated Human Services System Project, later renamed ACCESS NYC. Phase 1 of ACCESS NYC included a Web-based tool for residents to screen for eligibility for a variety of human service programs including TANF, public health insurance (including Medicaid), and food stamps. Phase II was an extension of the Web-based screening tool and included the ability to screen for eligibility for additional programs including subsidized child care, Head Start, and Universal Pre-Kindergarten. The City selected the Cúram Human Services ERP as the solution and Accenture as the third-party integrator for Phase 1.0. They have selected Oracle Public Sector for Phase 2.0 and have brought development in house.</p> <p>In 2007, based largely on the success of ACCESS NYC, Mayor Bloomberg issued an executive order creating the Office of the Health and Human Services CIO and directing that the City expand the mission for ACCESS NYC to create a common enterprise platform for human service programs across New York City. This new program, known as HHS-Connect, when fully implemented will be one of the larger integrated enterprise human service systems in the Country and will be used by more than 13 agencies. In late 2007, KPMG was selected for a five year contract to be the provider of PMQA services for this ground breaking initiative.</p> <p>HHS-Connect is the entity responsible for driving the Information Communication Technology (ICT) strategy for New York City's Human</p>

KPMG Reference #2	
	<p>Services Agencies. Currently all nine human services agencies have their own legacy applications, interface policies, and information exchange processes. The HHS Connect mission is to break information silos through the use of modernized technology and coordinated agency practices to more efficiently and effectively provide Health and Human Services to New Yorkers. The Health and Human Services comprises of 9 city agencies that provide various services to the clients. Since 2008 the HHS Connect program has developed several applications that march towards the roadmap. The initial applications were foundational projects that help create a framework and infrastructure for all future initiatives. The foundational projects in which KPMG monitored included Common Client Index, Worker Portal, Online Applications, Federated Document Management and Enterprise Architecture. A brief description of each is provided below.</p> <p>CCI: The HHS Common Client Index is a data store that allows the unique identification of a client across different HHS systems (both within an agency and across agencies). The HHS Common Client Index a.k.a. Master Data Management provides linkages and mapping of the common client key to identifying information about that client in other systems. Reduce time to get copies of documents from other participating agencies, identify duplicate information, improve quality, timeliness and consistency of information about a person family or household, improve timeliness of action based on client provided documents.</p> <p>The first release of the Document Management solution will federate one city agency's document repository and integrate with the Worker Portal in order to give browser-based access to that agency's documents.</p>
Original Project/Contract Start Date:	December 2007
Original Project/Contract End Date:	December 2010
Original Project/Contract Value:	\$8 Million
Final Project/Contract Date:	December 2014
Was project/contract completed in time originally allotted, and if not, why not?	Yes
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Yes

KPMG Reference #3	
Reference #:	3
Company Name:	KPMG
Identify role company will have for this RFP project (check one):	
<input type="checkbox"/> Vendor <input type="checkbox"/> Subcontractor <input checked="" type="checkbox"/>	
Project Name:	Independent Verification and Validation for the Information Technology Modernization Project
Primary Contact Information	
Name:	Steve Toyama
Street Address:	2415 1st Avenue, MS B184
City, State, Zip	Sacramento, CA 95818
Phone, including area code:	(916) 657-6050, (916)263-3643
Facsimile, including area code:	N/A
Email address:	steve.toyama@dmv.ca.gov
Alternate Contact Information	
Name:	Steve Westerman
Street Address:	2415 1st Avenue
City, State, Zip	Sacramento, CA 95818
Phone, including area code:	(916) 657-8762
Facsimile, including area code:	N/A
Email address:	swesterman@dmv.ca.gov
Project Information	
Brief description of the project/contract and description of services performed:	<p>The DMV maintains the largest database of its kind in the United States, consisting of approximately 110 million (current and past) vehicle registration records, and 40 million driver licenses and other identification records. The automation systems using these databases process over two million transactions per day. However, due to aging technologies and loss of subject matter expertise with regard to legacy systems, DMV is replacing its entire automation environment to improve its ability to operate and maintain these critical systems and reduce overall risk.</p> <p>KPMG was retained by DMV to provide Independent Verification and Validation services to the project. The scope of our engagement includes oversight of 5 projects with a total budget of \$200m. For each of these projects, KPMG inspects and assesses Vendor Procurements, Requirements Management, System Hardware, System Software, Environments (development, test, staging, training, and production), Software development tools and techniques, Testing (unit, integration, system, acceptance, and final acceptance), data management, and other topics as dictated by the needs of the project.</p> <p>Specific tasks include:  Independent inspection, verification, and validation of software products to verify compliance with requirements</p>

KPMG Reference #3	
	<p>Independent identification of risks as appropriate to the project</p> <p>Review and comment on the project risk management process to ensure appropriate identification and mitigation of project risks</p> <p>Providing traceability analysis to help ensure the project's deliverables comply with approved plans and accurately reflect the requirements</p> <p>Verifying reported results against actual outcomes for system testing, data conversion/validation, interface testing, and customer acceptance testing, special assessments, analysis, and report preparation as required.</p> <p>We provide a monthly report to management detailing the results of our monthly IV&amp;V fieldwork in terms of observations, risks, trends, and recommendations. We meet regularly with the Executive Sponsor and Program Management team to discuss our positions and provide additional considerations to support executive decision making efforts.</p>
Original Project/Contract Start Date:	July 16, 2007
Original Project/Contract End Date:	May 24, 2013
Original Project/Contract Value:	\$3,051,900
Final Project/Contract Date:	Ongoing
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing
Was project/contract completed within or under the original budget / cost proposal, and if not, why not?	Ongoing

**6.3.4** Vendors must also submit Attachment F, Reference Questionnaire to the business references that are identified in Section 6.3.3.

The Xerox Team acknowledges and accepts RFP requirement 6.3.4.

**6.3.5** The company identified as the business references must submit the Reference Questionnaire directly to the Purchasing Division.

The Xerox Team acknowledges and accepts RFP requirement 6.3.5.

**6.3.6** It is the vendor's responsibility to ensure that completed forms are received by the Purchasing Division on or before the deadline as specified in Section 10, RFP Timeline for inclusion in the evaluation process. Reference Questionnaires not received, or not complete, may adversely affect the vendor's score in the evaluation process.

The Xerox Team acknowledges and accepts RFP requirement 6.3.6.

**6.3.7** The State reserves the right to contact and verify any and all references listed regarding the quality and degree of satisfaction for such performance.

The Xerox Team acknowledges and accepts RFP requirement 6.3.7.

## VIII.4 Vendor Staff Skills and Experience

**REQUIREMENT: RFP Section 6.4, pg. 76**

### 6.4 VENDOR STAFF SKILLS AND EXPERIENCE REQUIRED

*The vendor shall provide qualified personnel to perform the work necessary to accomplish the tasks defined in the Scope of Work. The State must approve all awarded vendor resources. The State reserves the right to require the removal of any member of the awarded vendor's staff from the project.*

*The Xerox Team employs a top-down and bottom-up approach in creating a staffing plan to help ensure the Exchange has a dedicated team with a strong and reliable foundation.*

The Xerox Team has developed a core group of trusted individuals with the appropriate knowledge and skills to oversee all phases of the business operations solution (BOS). The excellence of our staffing capabilities is demonstrated by the more than 4,700 employees we currently provide on our MMIS, fiscal agent, and eligibility contracts throughout the country, helping assure the Exchange that we are well qualified to provide high-quality SSHIX project staffing.

### Project Staffing Plan Development

The development of the staffing plan and the structure of our organization are based on the unique needs of this contract and incorporate the best practices we have proven with results on similar contracts. Our staffing plan is based on the Project Management Body of Knowledge (PMBOK) and is customized to meet the needs of each project and the timing of each contract phase. It provides the details of our project team, including structure, job descriptions, and reporting structure. We regularly update our project team organization chart and job descriptions to accommodate any changes in contract information, and to understand any changes regarding roles and responsibilities.

### Recruitment Strategy

Our staffing plan outlines the process for identifying and obtaining initial project staff and maintaining adequate staffing levels for the operation of the project. We have a refined recruitment approach to accomplish this, as outlined in Table VIII-14, Recruitment Strategy.

Table VIII-14. Recruitment Strategy	
Method	Results
Job Descriptions	We use our knowledge and experience gained from more than 40 years in the government healthcare arena to develop job descriptions. We outline the roles, responsibilities, and requirements for each position to meet and exceed the unique needs of the Exchange. We use job descriptions to match the positions to personnel whose experience and qualifications will meet the requirements.
Recruitment and Selection	We hire people with the right skill sets and mindset for each job. Our recruiters use a variety of sourcing techniques to identify potential employees and our recruitment approach is compliant with all federal, state, regional, and local regulations. We use a well-defined recruiting process and advanced technology to facilitate and expedite the placement of qualified individuals.

Table VIII-14. Recruitment Strategy	
Method	Results
Experienced Recruiters	We have seasoned recruiters, geographically dispersed across the United States, who are devoted to sourcing, screening, and hiring staff for projects. The Exchange is supported by the Xerox Team's ability to hire people with the appropriate skills and experience to perform the project's scope of work in a high-quality manner because we have successfully demonstrated this ability time and again across many healthcare projects, including large contracts.
Staffing Process	Our recruiters screen candidates by reviewing resumes and conducting a personal interview. The recruiters then forward the resumes of promising candidates to the hiring managers, who schedule and conduct formal job interviews. This is a continuous process to assure that candidates are available for vacancies. As part of the screening process, we require that individuals pass a test of skills and knowledge relevant to the position for which they are being considered. Depending upon the position, individuals are given tests designed to assess their technical, customer service, presentation, written communication, or other skills.
Retention	We strive to foster a "people first" focus within our workforce and an atmosphere of respect and thoughtfulness among our employees. Our enthusiastic and caring leaders, employee recognition processes, benefit packages, and the satisfaction of our customers have resulted in an excellent employee retention rate.

## Recruitment Steps

Recruiters work closely with hiring managers throughout the recruitment process to verify they have a complete understanding of job requirements, the candidates possess the requisite knowledge and skills for each position, and that positions are filled in accordance with staffing plans, operational needs, as well as compliant with all employment regulations.

Recruiters follow the process in Table VIII-15, Recruitment Steps, regardless of contract phase and whether conducting internal or external candidate searches.

Table VIII-15. Recruitment Steps	
Component	Benefits
Position Description Matched with Skill Requirements	Helps ensure "the right person for the right job" Matches experience with the specialized areas and other skill requirements
Competitive Wage and Benefits Package	Attracts well qualified candidates
Behavioral Interviewing Process	Most accurate predictor of future performance is past performance Internal training classes available to recruiters and hiring managers: Behavioral interviewing How to interview and hire the right people Effective hiring and interviewing skills Recruiting and retention strategies for the tight labor market Managing diversity and inclusiveness
Skills-based Testing	Verifies a candidate possesses the requisite knowledge and skills
Background and Drug Screening	Helps ensure safety of our employees and protects our client's business Required for all Xerox and temporary staff

Table VIII-15. Recruitment Steps	
Component	Benefits
On-boarding	<p>Helps ensure employee understands expectations and responsibilities</p> <p>Helps ensure employee understands security, privacy, project, and program rules of conduct</p> <p>Helps ensure employee understands client organization and services provided to the community</p> <p>Employee understands all resources available to support success in the job</p>
Applicant Tracking System	Facilitates searches for qualified candidates through a highly automated staffing process
Multi-lingual Recruiting	<p>Seeks potential employees with cultural backgrounds and language skills that match those of beneficiaries and enrollees</p> <p>Language testing validates candidates' competency in stated language</p>

## Contingency Staffing

The Exchange requires uninterrupted, high-quality service from its contractor. We agree and commit to continuously adjust and align our organizational and staffing levels to meet service delivery requirements in an efficient and transparent manner. Under our proven project management methodology practices, we monitor project tasks, schedule and anticipated fluctuations in workload in order to effectively plan for the resources needed on the project. Contingency planning is integral to a sound resource management approach and is a standard component of project development for all Xerox contracts. In the following discussions on key personnel, and support staff, we present our approach to adjusting, reassigning, or adding resources.

**Key Personnel.** While we do not anticipate the need to replace the key personnel prior to or during the base period of the contract, we recognize that individuals may choose to take other opportunities. We have a standardized plan in place for backfilling key personnel who, for personal or other reasons, need to leave their positions during the contract. Should key personnel realignment be necessary, the Xerox Team will do the following:

- Submit comprehensive written notification to the Exchange in advance of any plans to change, hire, or reassign designated key personnel
- Fill the vacated key position as soon as possible with the most qualified replacement approved by the Exchange

These efforts, as well as an extensive network of contacts throughout the industry, allow us to quickly identify and hire highly qualified individuals for key management positions within a short period of time.

**Support Staff.** Our staffing plan allocates sufficient support staff to successfully meet project requirements. In the unlikely event that workloads exceed the capacity of these resources, or additional support is required in another work unit, we create a contingency plan that can be put into place quickly. Through our project management practices, strong leadership team, and depth of resource availability from all our partners, the Exchange can expect that resources meet the needs of the project.

The Xerox Team acknowledges and accepts RFP requirement 6.4.

## Proposed Key Personnel Roles and Length of Relevant Experience

Table VIII-16, General Description and Relevant Experience of Proposed Key Personnel, shows the roles of our proposed staff, as well as their summary of qualifications in the IT field and in developing medical eligibility determination systems.

Table VIII-16. General Description and Relevant Experience of Proposed Key Personnel		
Position Title	Staff Name	Summary of Qualifications
Account Manager	Erik Newlin	<p>Nearly a decade in State government service having served in many roles over the course of his career. Providing the ideal blend of industry knowledge and client skills necessary for this position, including:</p> <ul style="list-style-type: none"> <li>• Systems/Business Analyst for various Social Service programs including TANF, Food Stamps, and Medicaid</li> <li>• Medicaid Management Information Systems (MMIS) Manager</li> <li>• MMIS/Fiscal Agent Contract Manager</li> <li>• Statewide Operations Manager for the State Children's Health Insurance Program (SCHIP)</li> <li>• Medicaid Transformation Grant Manager</li> <li>• Medicaid Information Technology Architecture Assessment (MITA) Project Manager</li> <li>• 1115 HIFA waiver Project Manager</li> <li>• Client Relations Manager, and</li> <li>• Interim Deputy Account Manager on the Xerox Mi Via project</li> </ul>
Lead Architect/Technical Lead	Jeff Drewes	<p>19 years of experience in relational and database structure and design.</p> <ul style="list-style-type: none"> <li>• Experienced leader, system architect, SOA architect, database designer and administrator, programmer, and system administrator</li> <li>• Knowledge in operating systems, application development, database development, and hardware (servers and network)</li> <li>• Expertise in system architecture design and implementation, database design and management, software design, database tuning, database programming, program troubleshooting, and task management.</li> </ul>
Implementation Manager	Matt Benton	<p>More than 18 years of experience helping organizations (public, quasi-governmental, and non-profit) improve their operations, organizational structure, information technology, and financial results</p> <ul style="list-style-type: none"> <li>• Experience in handling a position equivalent to and higher than implementation manager</li> <li>• Extensive experience in implementing large-scale IT systems, as well as in cost/benefit analysis, policy and program development, strategic planning, customer/market strategy, process reengineering, cost reduction, and organizational transformation (i.e., organizational design, change management, communications, and training)</li> </ul>



## VIII.5 Vendor Staff Resumes

*REQUIREMENT: RFP Section 6.5, pg. 80*

### 6.5 VENDOR STAFF RESUMES

*A resume must be completed for each proposed individual on the State format provided in Attachment I, including identification of key personnel per Section 13.3.19, Key Personnel.*

*The success of any project is a direct result of quality staff; the Xerox Team brings the skills and resources to meet the requirements of this project for the Exchange*

To help ensure the most effective use of staff, including subcontractors, we employ resource management processes that focus on the core activities related to human resources planning, acquiring the project team, project team development, and management of the project team. The process includes determining the roles, responsibilities, reporting relationships, and other activities supporting the project organizational structure and a staff management plan necessary for project success.

### Commitment of Key Personnel to the Project

Working with our partners, *CHOICE* Administrators and KPMG, our key personnel are industry leaders who have significant experience implementing and operating our proposed HIX solution and will ensure a successful implementation for the Exchange.

The Xerox Team's key personnel are committed to this project as evidenced by our provision of the individuals named in this response during the actual project, who are dedicated full-time or on a basis agreed upon with the Exchange. Furthermore, our proposed staff members are fully trained and conversant with our applicable methodologies. This is the same commitment that our key personnel bring to ensure the success of the Exchange project.

The Xerox Team acknowledges and accepts RFP requirements 6.5 and 13.3.19.

### Key Personnel Resumes

Resumes of our proposed key personnel and certain staff who will play significant roles to ensure the success of the Exchange project are provided in RFP Section Tab IX Attachment I – Proposed Staff Resume(s)

### Organizational Chart

The Xerox Team uses both implementation and operations professionals with extensive knowledge of and experience with exchange implementations. These seasoned veterans know what it takes to successfully and efficiently implement a new project and can execute their responsibilities correctly, on schedule, and to the satisfaction of the Exchange. Our team knows how to get things “up and running” within the required time frames. Our key personnel have years of experience implementing exchanges, in both the SHOP and Individual markets. Moreover, several members of the key personnel management team for operations begin on the first day of design and analysis activities, while others transition to the project on a staggered schedule during implementation to ensure a seamless transition from implementation to operations.

We provide our functional organization chart of the Exchange operation, which reflects main departments and staff members with their titles in these departments. Exhibit VIII-1, Nevada Exchange Organization Chart, reflects our staffing for all implementation and operations activities.

***In accordance with RFP Section 11.6, Confidentiality of Proposals, Xerox has designated a portion of this response as "Confidential." The content has been removed from the main proposal and submitted in a separate binder labeled Part IB-Confidential Technical, Tab VIII Section 6 – Company Background and References.***

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